IS AIDS A MAN-MADE DISEASE?

Is AIDS man-made?

Does HIV really cause AIDS?

This issue kicks off a series of AIDS-related articles which will deal with issues that you are not being made aware of.

Taken from a speech given by Dr Robert Strecker, M.D. circa August 1990

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It's my pleasure to be here today and I'm glad that all of you could attend. We're going to talk a little bit about AIDS. This is a topic we've all heard a great deal about but, quite frankly, most of what you've heard about is totally fiction. We got involved in this topic totally accidentally.

In about 1983 my brother and I began working on an insurance plan for a large bank in southern California and in doing that in 1983, nobody knew what AIDS was going to cost us. So we decided that in writing an insurance plan for about 30,000 people, we would determine the cost of AIDS for ourselves. And that led us into this whole problem of not only AIDS, but what has come out about it. And basically what came out about the inquiry was the fact that we concluded that the AIDS virus was a man-made phenomenon. It's not something that came from the jungles of Africa or some monkey virus, or from some monkey biting some African on the ass, and then bam, 100,000 cases of AIDS come out of Africa.

This virus was invented in a laboratory. They'd been working on producing it for 30-40 years. So, you would sort of have to ask yourself, when AIDS occurred after they had been writing about it for such a long period of time, and they've been trying to make it for such a long period of time, why no one is running around, shouting and saying, "Hey, you know, we finally did what we were attempting to do. We succeeded in producing a virus that destroys the immune system and kills people." If people understood that this virus was designed in an attempt as an agent of mass destruction, instead of the misconception that somehow this is a virus that only attacks homosexuals or this is a virus that attacks drug abusers, I think we would all have a different appreciation.

There are two topics that most of us don't really have any knowledge about. One is the precedence of these kinds of experiments. Recently in the *Los Angeles Times* just a couple weeks ago, I was reading an article where they were talking about a small town in Washington state where a lot of people in that community had developed cancers of some strange sort. And of course the guys of whom all in their family developed these cancers out of the blue, happened to be living next to some kind of nuclear plant. The question was: was this plant somehow causing these cancers? Well, of course they denied it and the doctors all said, "These guys are crazy. These just happen to be occurring."

But the fact was, as it came out, this nuclear plant had actually been releasing radiation into the atmosphere. This was probably not an accidental release, but an intentional release, and that they were actually studying the effects of these radiation releases upon the surrounding population. So you begin to get an appreciation of what the government is capable of doing.

Then you turn to the history of the CDC (Centers for Disease Control) and the history of experimentation on the United States citizens without anybody's knowledge or concern. Now, in a series of books such as *A Higher Form of Killing* by Packsman and Harris, or *Clouds of Secrecy* by Leonard Cole who is a Rutger's professor, you can document over 300 open-air biological experiments conducted on us without our consent or knowledge. That's 300 that we have documented in the last 20 or 30 years. You have only to turn to the history of the Tuskegee, Alabama experiment to see the illustration of doctors neglecting what's been going on. They're saying, "Well, this kind of experiment couldn't occur; we'd all know about it. Doctors would do something about it." In Tuskegee, Alabama, in the '30s, black men were recruited for an experiment in which they were followed for about 40 years in open medical literature, where there was observed the progression in these black men of syphilis. Now, the interesting part about this experiment was, when penicillin became available, these men were prevented from being treated. This was conducted by the United States Public Health Service Department, which of course is now known as The Centers for Disease Control in Atlanta, Georgia, who are the captains in charge of what's happening in our AIDS war. So you see, there is precedent for experimentation on people without anybody's knowledge or consent.

There is also an entire history of experimentation on people with chemical agents, not only biological agents, but chemical agents, particularly in some experimental projects called MK-Ultra and some others where the United States Government officials were actually introducing chemicals into men. For instance, in San Francisco, the most unusual that has been documented that is public, is where prostitutes were given LSD that they were giving to their 'johns' or their sexual partners, and then the CIA were actually sitting behind one-way mirrors, and they were filming what was happening to these men who had been drugged with LSD from prostitutes. Of interest in the case is the prostitutes were arrested, then the CIA was actually intervening to see that they were released. So, this is some of the history of what's gone on in the past and that is readily available for anyone to read about in some of the books that are out—*A Higher Form of Killing* again by Packsman and Harris, or *Clouds of Secrecy* by Leonard Cole. *The Killing Winds* by Gene McDermott is another, so there is plenty of precedence.

What about prediction? We talk about prediction; in other words, in our review of the literature, we spent about 6 years in the library reading, digging out this stuff, and what we ran across in 1975 in Tokyo at an International Assembly of Leukemia Experts was a guy named Jay Clemenson. Clemenson is still alive—this is an interesting story. In 1975, Jay Clemenson, who is a world-renowned epidemiologist, was speaking before a group like this in Tokyo, all of whom were cancer and leukaemia experts. He got up and said the following: "We are in fact establishing conditions for a pandemic spread of an oncogenic virus varying on the scale of influenza of 1918." Now, what is he saying? What he is saying is, get ready, world, because scientists are making viruses that will cause leukaemia or cancer, and that will spread as readily as the flu and kill more people than the influenza pandemic of 1918, which killed 1/5 to 1/3 of the world population. Now, that is exactly what has occurred today. That is exactly what has occurred. The existence of AIDS and its close relatives is exactly the appearance of viruses that cause leukaemia or cancer, that are spread in a sense like the flu. In fact AIDS is not spread as easily as the flu, but some of its other relatives probably are, and these viruses are capable of killing not only (AIDS alone is capable of killing the entire human species) but certainly, in concert, all of them are capable of killing us off, totally annihilate the human race, and yet nothing is being done, more or less, where we are all sort of sitting around wondering what's going on. There has been really no attempt made to control the epidemic of this disease.

In 1969, Department of Defense representatives requested 10 million dollars to produce new viruses that could selectively destroy the immune system.

Actually, I'm just finding it interesting because if you want to learn about AIDS, the people that you talk to are the veterinarians. That's why it was interesting when [it was] mentioned that the public health official here had talked about cattle. These diseases came from cattle and sheep. They didn't come from monkeys in Africa. The story gets more preposterous as we get into it, but the reason that you know they didn't come from monkeys is because of the company that AIDS keeps, not because of the AIDS virus itself. If there were only AIDS virus, you probably couldn't make any conclusion because it could have appeared 'out of the blue', so to speak. Things do, in a sense, evolve or generate, but the interesting part is that if you look at the history of the theory of evolution and spontaneous generation, the United States National Institute of Health has spent billions of dollars telling us that spontaneous generation does not exist, and that evolution is the name of the game. And yet, when you come to the AIDS virus it's as if, 'spoof', there's no more history of evolution now we have spontaneous generation, because it just 'popped up'. It's here there is no one discussing where this virus came from. What was its evolution? What is its genesis? How is it put together? That's how we got into this topic in looking at where did this thing come from. And when you look at the nature of the AIDS virus, what you will discover is something very interesting. The genes of the AIDS virus don't exist in primates or man. If you took the genetic material of monkeys, chimpanzees, human beings and rearranged it, you cannot make AIDS. The genes of the AIDS virus exist in two other viruses called retroviruses of cattle and sheep. One of them is named bovine leukaemia virus of cattle, which is a T-cell leukaemia-producing agent, just like Clemenson was talking about. The other is visna virus, a brain-rotting virus of sheep, that has managed to infect about 75% of the sheep on the western ranges of the United States and the rest of the world.

In the 1950s [there was an outbreak of a] bovine leukaemia virus in Europe. A guy named Mamaro and a whole bunch of other retrovirologists in Europe were looking at cattle and said, "You know, there's something strange going on with these cattle. They have a strange kind of disease." And they knew it was some kind of viral problem, but they couldn't get a control over it. What they did was the exact thing that [was] mentioned; they established a programme actually called Call and Kill. So, only the animals that they concluded were infected were called out and exterminated. All across Europe they had a plan of Call and Kill of all the animals that were infected, and as a result they slaughtered hundreds of thousands of animals. This led to the development of disease-free herds.

In the United States they did a very interesting experiment. If you look at the way we test for the AIDS virus in the blood, we test for the presence of an antibody to the virus; that's the screening tests that's done. They don't actually check and test in general for the virus itself. If you donate blood at your local Red Cross or hospital, they take the serum out of the blood, and then they check the serum to see if there's an antibody in that blood directed against the AIDS virus.

Now, in the 1970s, early '70s, late '60s, they did an interesting experiment here in the United States in Ames, Iowa, conducted by a guy named Vandermatten and girl named Miller. So Miller and Vandermatten took chimpanzees and injected them with a virus named bovine leukaemia virus, because the question was, "Is this virus dangerous for human beings?" And what happened was that these chimpanzees produced antibodies against that virus. So what was their automatic conclusion? The conclusion was that because these animals made antibodies against this virus, this virus represented no threat to the animal. So, therefore there was no programme of containment of bovine leukaemia virus in the United States. As a result, about 15% of the cattle in this country are now infected with bovine leukaemia virus. If you look at the death certificates in the areas of massive milk-producing states, like Wisconsin, Iowa, and Nebraska, there's a virtual explosion of T-cell leukaemia among dairy farmers, because primarily they drink, in my opinion, unpasteurised milk. The only thing that has prevented all of us from being infected with the T-cell leukaemia virus is the fact that pasteurisation of milk kills the virus.

Go back to 1969, a testimony before the Church Committee in Congress. The Department of Defense representatives requested 10 million dollars to produce new viruses that could selectively destroy the immune system. In 1972, a group of virologists writing in the *Bulletin of the World Health Organisation* said this: "Let's make a virus that will selectively destroy the T-cell system of man." They went further and said, "Also, let's make a virus that will selectively destroy the B-cell system." And they wrote down,

in volume 47, page 257, 1972, *Bulletin of the World Health Organisation*, and said why they wanted to make these agents. They said, "We can use these agents to produce certain kinds of cancers and leukaemias. It will allow us to make these diseases, it will allow us also to make what we call dissolving diseases," which is part two of that same request for production. So, in 1972, a group of virologists said, "Let's make AIDS."

In 1975, Clemenson says that it's coming, and in 1980 it's here, and everybody's wandering around scratching their heads, saying, "Geez, where did all this stuff come from?" Well, really, to me it seems quite simple. This virus was produced in a laboratory by the recombination or the mixing or the melting together or the mating of two viruses, one named bovine leukaemia virus of cattle, and the other named visna virus of sheep.

Now, if you look at the diseases in humans that are presently running, there is a whole lot more going on out there besides AIDS. There is an infectious T-cell leukaemia virus named HTLV-1 which is human T-cell leukaemia virus 1, which is a confectious agent. It looks like bovine leukaemia virus, it causes the same kind of disease in humans as it does in cattle, and this virus is probably far more infectious than the AIDS virus. This virus has managed to infect 20-30% of southern Japan already. It is infiltrating into the Asian countries, and because they're so densely populated...

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We can worry about Japan all we want, but I can tell you this, that short of a cure for these diseases, in about another 10 years or so the entire population of Japan will suddenly get leukaemia and die, short of there being a cure for this problem, because this disease will spread in that group of people due to their density of population. The same thing will occur in China, Taipei, India and the rest of the Asiatic countries. HTLV-2 which is HTLV human T-cell leukaemia virus 2, causes hairy-cell leukaemia in humans, the same as the similar disease bovine visna virus causes a very unusual leukaemia, hairy-cell leukaemia, in cattle. So, these diseases do have analogous agents that they could have evolved from or that they were derived from that are present today in laboratories around the world.

Ask yourself, how do you take a virus of cattle and sheep and make it into a virus of humans? In 1971 and 1972, the scientists of the world got very interested in this group of viruses called retroviruses. Retro stands for the presence of an enzyme called reverse transcriptase. Now, that doesn't mean anything to us, but what does it really mean? Here is a virus which is in an RNA form. Our genes are in a DNA form. In other words, there are two separate entities, the viruses on RNA form are different than your genetic material, which is DNA. Why they were interested specifically in these agents more than the fact that they could make ethnic and racially specific bio-weaponry was this, and this is the very nature of the virus that allows them to do this: the virus enters the cell, it changes its form from an RNA form into a DNA form, which is now like your genes. It inserts itself into your genetic material and then interacts with the genetic material that is there; it then leads to production of new virus. The fact that it inserts itself into your genetic material and then expresses itself, in other words, once it's inserted it can then act, that fact made it perfect for introducing genes into species. So scientists said, "This is how we will introduce genes and manipulate the genetic material of species."

They had been looking for a mechanism, trying to fire DNA into cells. In everything you can think of they were trying to manipulate the genetic materials. Because, in their thinking, they can do this job better than anybody else. So, this virus became of interest because it has that ability; it will introduce genetic material from the outside, and once it's introduced it changes forever that species. Just as with humans, now we have modified our genes, in a sense, forever, or short of a way to wipe out this species of this strange virus that's inserting itself into us.

In 1972, when they were monkeying around with this thing in the United States National Institute of Health, a guy named Stuart Aronson published a paper and he was working with a mouse retrovirus. What Aronson discovered was this: he put that mouse retrovirus into a human tissue culture plate and then he came back after it was packaged—in other words, it grew there several times—and what he discovered was that this mouse retrovirus would no longer grow in mice: it would now grow most efficiently in human tissue. So he had discovered how to make a cross-species jump, in other words, how you change the virus of one species into the virus of another species. This is how you take bovine leukaemia virus of cattle and change it into HTLV-1 human T-cell leukaemia virus. You merely have to package or grow the virus in human tissue for a sufficient period of time and you now have human T-cell leukaemia virus. If you take bovine visna virus, the original AIDS virus, and grow that virus in human tissue, you now have human AIDS virus.

One of the things we didn't understand initially (or at least it wasn't clear to us) in 1983 and 1984 was: were these people intentionally deceiving people, the American public—you and me—or were they just stupid? Now, don't ever believe that they're stupid. We asked a question of several virologists, and one of the questions was, "Could you take bovine leukaemia virus of cattle and visna virus of sheep and make an AIDS-like agent?" In 1983 and 1984 we called up one of the world's leading retrovirologists, one of the leaders in our AIDS industry, and said, "Can you do that kind of an experiment? Could you make an AIDS-like agent?" This is typical; he said, "Who wants to know?" And I said, "I want to know. I'm Robert Strecker." So he said, "Well,

looking deep in the darkest part of Africa, you might find a virus similar to AIDS. But you could never, ever—no, no, no—do that kind of an experiment."

Now, for some reason, we didn't quite believe him. So we went to the library and we put into the med-line search, and anybody can do this; if you don't believe this is possible, simply go to your local library and ask for a med-line search. We thought what we'd call a virus if it was live AIDS and we knew that it had bovine and visna characteristics, so we said, "Well, give us all the papers on visna bovine virus and then give us all the papers on bovine visna virus from 1950 to date." That was from 1950 to, like, 1984. And, whammo, out they came. Out came papers on a virus named bovine visna virus which had the exact same shape as the AIDS virus, it had the exact same molecular weight, it had the exact genetic structure in a sense, it had the exact same magnesium dependency, which is relatively unique to this class of agents, it had the exact same capability of killing T-cells selectively and yet, in the cumulative knowledge of the world's AIDS experts, this virus didn't exist. Now, that's a lie.

The same technique that you make human T-cell leukaemia virus from bovine leukemia virus is how you make human AIDS virus from bovine visna virus. And you take that virus and grow it in human tissue. In 1978 a paper was published in which they were growing bovine visna virus in human tissue. And of course, that's how you adopt that virus in humans. In that paper in 1978, which was published in *The Journal of General Virology* for anybody who's interested, it said, "Is it possible, might it be, could it be that this virus is capable of producing either malignancy or a slow-virus disease of humans?" And, of course, what is the malignancy? The malignancy is Kaposi's sarcoma, and of course the slow-virus disease of humans is AIDS.

So, there's prediction, there's precedence, there's production. What's left? Well, inoculation. So, what do we think really happened? What we think happened was, in 1972 when the United States National Institute of Health was funded with millions of dollars to prove once and for all that viruses cause cancer, of which of course they didn't pre-1972, and the reason that we know that is because cancer was never infectious before, but it is now. In 1972 we produced a group of viruses that will cause cancer, basically in the laboratories around the world and then, in our opinion, these viruses were probably tested. We think they were tested in large populations in Africa, which explains how you get 300 million Africans probably infected today. We think that the entire continent of Africa will be extinct within the next 10 to 15 years. Dr William Kendall Douglas, who recently returned from Africa, where he set up a clinic for treatment, says that already in Africa AIDS is so devastating that they are dying literally like flies. So, in the next 10 or 15 years again for sure—this is absolutely true, the same as what we have predicted before here—you will be able to go to Africa and verify for yourself, if you're stupid enough to go, whether or not there's anyone left. And, there won't be anyone left if our predictions are correct.

The epidemic in Africa could not have started from a single-point infection; in other words, the numbers infected are so great that there had to be a mass inoculation at some point in the mid-'70s. What we think really happened was a group of scientists went to Africa and actually tested these agents in Africa.

Now, how did they appear in the United States? If you look at AIDS in the United States, AIDS didn't come here as a black, heterosexual disease. How did AIDS appear here? It appeared in a very select group. Young, white, male homosexuals between the ages of 20 and 40 who live in select cities, New York, San Francisco, Los Angeles, Chicago and St Louis. In 1978 it appeared in New York, and in 1980 in San Francisco. Now that epidemiology is exactly the same as the United States hepatitis B vaccine study. We think that the virus was introduced into the homosexuals in this country in that project. Could it have been Anton Dega, the alleged gay airline steward who flew for the

Canadian airline? Well, to look at that story as put out by Schultz in his book, *The Band Played On*, it gets a little preposterous. First of all, the epidemiology of AIDS of a gay steward who is flying for a Canadian airline should have reflected the cities that they were flying to, and it doesn't. More importantly, allegedly the CDC was monitoring the activities of this steward, and so you must ask yourself why didn't the United States federal body, whose purpose it is to allegedly stop the spread of disease, interdict a person who's knowingly going around and spreading a uniformly fatal infectious disease. So what was the failure to act? Furthermore, how could you postulate that this man only had sex in unique cities separated by thousands of miles?

If you look at the theory of the virus coming from Haiti to New York City, you must wonder what happened to the gays of Miami, New Orleans and Houston which have very large gay populations, who are just as likely if not more likely to go to Haiti than the gays of New York City, San Francisco or Los Angeles. To our knowledge to date, if you look at the epidemiology of AIDS in the United States still today, it corresponds to the hepatitis B vaccine study. The major cities affected are still those where the hepatitis B study was conducted.

Now, what is happening today? The rule of thumb for virology and this disease's retroviruses is this: for every case that you see, there will be 100 cases coming. For every overt case of disease (this is in animals), for every sick cow that you can see, you have 100 affected. So in the United States today, if we have 130,000 or 140,000 cases of AIDS, that should calculate to 13, 14 or 15 million infected. Even at a 50 to 1 ratio, you're still talking about 6 1/2 to 7 million people infected. If you calculate even 7 million people infected at a minimum cost of $100,000 a year, we're talking about some astronomical sum being spent in the next 5 to 10 years just in the treatment of this disease alone. If you look at Africa, where there are already at least 2 million cases of overt disease, we're talking about 200 million infected. So, that's how we conclude that Africa won't exist in the next 5 or 10 years. It will simply die out. You'll see a population implosion.

The disease AIDS is already affecting Africa to such an extent that by satellite photos, the tropical forests in the African part of the African AIDS belt are already starting to regrow. We talked to the representative of Uganda recently and he says this, "They have already written off everybody over 16." Everybody over age 16 they are already considering is going to die; we concur, we agree. They're concentrating their educational efforts on everybody under 16 hoping that enough people will remain to keep the country, in a sense, viable.

Now, what's going to happen here? What we see happening here is more and more cases and the spread of this disease into the heterosexual population. This disease has nothing whatsoever to do with homosexuals in our opinion, except that's where it was placed. In New York City already, AIDS is the #5 killer of women in the child-bearing age, and within 2 to 3 years I can assure you that AIDS will be the #1 killer of women in the child-bearing age. Across this country within 3 to 5 years, AIDS will be the #1 killer of women of all groups in the child-bearing age.

What's the solution? The solution is an even more interesting problem which we stumbled into in all of this sort of rambling-about reading, and what we discovered was that, in our opinion, the disease can be fixed by a pulsed electromagnetic wave, which led us into the theory of electromagnetic medicine, which led us to the theory of Royal Raymond Rife. The story of Rife (see NEXUS vol. 2, no. 16) is even more startling because if what Rife did is correct, and I believe that it was, then everybody who died of a cancer-infectious disease since 1920 died needlessly.

Rife's theory is this; it's very simple in principle. Just as with a crystal glass, if you radiate it with the right audiotone, what Rife said was that viruses and bacteria and cancers could be killed

uniquely by a correctly pulsed electromagnetic radiation. And we believe that's true; in fact, there's an overwhelming amount of evidence that shows that that's true. So we've got to redirect our research efforts away from the drugs because, quite frankly, I'm convinced that this disease and all of its relatives will never be cured by drug therapy because they're far smarter than that. The disease is designed in a sense not to be cured by drugs. The disease was designed as an agent of mass destruction and it's already done that.

Now, what can we do? Everybody asks that question. We're going to get to that here; hopefully, we're talking about what we can do politically, but this is a different sort of topic and I'm going to tell you some things that you can do. The first thing is, we have a videotape for sale back in the corner back there, so for any of you who don't have that, or even if you don't have it, you probably should pick up another copy and distribute it out to your local representatives or your senator, and you can't simply send it to them. That doesn't work; we tried that. You've got to go down and put it in their hands. The second thing is, we've got to become politically active and that's what this is about. That's why we're meeting here and hopefully over the next 2, 5, 10 years this change will occur. We're already on a radio network called Sun Radio Network; we're in about 100 cities nationwide, every night for 3 hours, 9.00 pm to 12.00 midnight PST. So if you're in a city where you have the Sun Radio Network, talk to your radio station about the Dr Raymond and Dr Strecker show on, so we can be heard in your cities. Starting 3rd September across the country in 200 and perhaps 400 cities, we're going to be on CBN which is Christian Broadcasting Network, every morning at 9.00 am PST. If you're in a town where they have CBN Network, then go down to your radio station and start talking to them about picking up our show, which will be on 9.00 to 10.00 am. We'll be answering medical questions, but we'll also be dealing with other questions, such as this. In addition, we're now also writing articles for about 10 newspapers already across the country. So what you can do, if you're from a city, any size city, from 5,000, 50,000, 1,000,000 or 10,000,000, on Wednesday when you get home I want you to call my office at (213) 254 7127 and we'll be happy to send you a press kit which you can take to your local newspaper and hopefully get us public in your local newspaper, so that people can be exposed to something other than the drivel that they're being exposed to in the media.

The way that people do investigative reporting is they get a comment from somebody like us which differs from the standard comment. Then they get on the telephone and they call up a guy at the National Institute of Health who has a vested interest in none of this being known, because obviously if the United States general population had some idea that this virus was designed to kill humans specifically, there'd be a whole lot different approach to what's going on in what we've been seeing. Also, there might be some oversight in some of the experiments that have been conducted in these laboratories. So, if you can, take this press kit to your local newspaper and you promote getting us into that local newspaper as writing a medical column, which we're already writing, we can show that we're already writing a medical column for about 10 papers in California. Are we going to set up some kind of computer networking? (Yes.) Great. That's another important thing. And computers will allow you access to this information. In the future, if you have interest, if they don't provide machines for you, we'll be able to provide machines for you. The thing about computers is that you'll have instant access to information, not information that's been exposed or filtered or whatever, and more and more of what happens in the future is going to depend upon telecommunications, upon accessed information, about you educating yourself. The last thing that anybody in power wants is

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for the American public to become educated. That's really where we're headed.

So, the main thing that I want you to carry home from this conference is this:

1) The AIDS virus is not a happenstance occurrence of nature. This virus was produced specifically upon request and is designed to kill people.

2) This didn't happen just by some accident. This has been worked on for about 30 to 40 years.

3) What happens in the future is going to be determined by what we do from this point on, in a sense. You've got to become involved politically; you've got to become involved actively, and that requires education of yourself and everyone around you, and you can't be apathetic and sit at home on your couch and watch the boob tube, because you're going to end up just as a boob.

We've got a couple of minutes left, any questions?

Q: Is the AIDS virus associated with Global 2000?

A: In the Global 2000, they talk about the mechanism of reducing the world's population and a plan to reduce it by, say, 1/3 to 2/3. Actually, short of a mass terror, AIDS has already done that. It's going to exterminate Africa, and its relatives will exterminate all of Asia. And, remember this, this country is only about 5 years behind Africa. If you have, say 2 million people infected in the United States, if the disease doubles every year, or even every other year or every 2 years, 2 million, you only have to require about 6 to 8 doubling times before you reach the entire population of this country infected. And this disease is far more transmissible than just by sex. We haven't gotten into that. That's all on our videotape. We talk about how the disease is actually moved, we talk about why it's not a sexually transmissible disease. We talk about a whole host of other factors that are interesting.

Q: What can we do to prevent catching the disease?

A: Right now, you can do this: you don't use any IV drugs, you don't have an excessive number of sexual partners, be monogamous if possible, and avoid any kind of biological agents that are being injected into you, no matter what they are.

Q: Will blue-green algae build the immune system?

A: I'll answer that by a quote from Dr Gallo, who's now under investigation for stealing the virus from the French, who is of course well known to all retrovirologists, but the United States has just gotten around to finally looking into that. Dr Gallo said, "If you give AIDS to Superman, he'll die of AIDS." This disease is designed to destroy the immune system and it will do that, highly effectively.

Q: Why would the enemy want to create something like this?

A: We thought a great deal about that, and there is a theory of why biological agents have never been used. In other words, you'd have to vaccinate your population against this virus before you could use it. That's not entirely true. In cattle, the disease has existed in cattle and sheep for many years. In cattle and sheep, there is a programme we talked about already, called Call and Kill. You can control these diseases in animals, provided you're willing to exterminate approximately 1% of your population every year. So, in a country like this, where obviously that kind of a programme is not going to occur, and if we don't enact some other kind of control mechanism or develop a cure, you could see the total annihilation of this country; whereas in a totalitarian state, if you were willing to exterminate 1% of your population a year, you would merely have to wait.

The motives. Again, it's like the agenda of different groups. We use the analogy of nuclear power. If you look at Con Edison, they use nuclear power to generate electricity. If you look at the DoD, they use nuclear power to generate bombs. The agenda of this technique depends upon who you are. The cancer researchers were merely looking into the genesis of cancer; in other words, how does cancer occur and can we make viruses that will cause that, can we study it and make new diseases, can we study it and find a cure for cancer? Alternatively, other people, particularly bio-warfare people, were interested in producing ethnic and racially specific bio-weaponry which they can now do. In other words, if you tell me a select population that you want to exterminate, I could make for you a virus that would selectively kill that group. So again, the agenda depends upon who the group is. And it isn't just us, it isn't just the United States that's been doing these sorts of experiments. These experiments are being conducted by all the industrialised nations of the world: Japan, France, England, Germany, Russia. This virus is being used in all the bio-warfare centres around the world. ∞

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